

Contractor Registration Requirements

Please email documents to the permits department at permits@cleveland.texas.gov

**All contractor registrations are valid for one calendar year*



1. Complete and return Contractor Registration Form (*page 2*).
2. Certificate of Insurance, with the City of Cleveland as the Certificate holder.
3. Please send clear, legible photocopies of all trade licenses and identification cards
4. Further Requirements According to Trade (*State of Texas License*) – See Below:

- **Building and General Contractors (*including Sign Contractors*)**

- Government Issued ID
- Commercial Insurance
- Trade License (*sign contractors, master electric sign*)

- **Plumbers**

- Government Issued ID
- Contractor License and Master Plumbers License
- Commercial Insurance

- **Electrician**

- Government Issued ID
- Contractor License and Master Electrician License
- Commercial Insurance

- **Mechanical**

- Government Issued ID
- A/C Refrigeration Contractors License
- Commercial Insurance

- **BPAT**

- Government Issued ID
- BPAT License
- Commercial Insurance

- **Fire Alarm or Fire Sprinkler**

- Government Issued ID
- Trade License
- Commercial Insurance

- **Building Transport Companies**

- Government Issued ID
- Commercial Insurance

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REGISTRATION APPLICATION

Please select all that apply:

<input type="checkbox"/> General Contractor	<input type="checkbox"/> Master Plumber	<input type="checkbox"/> Master Electrician
<input type="checkbox"/> HVAC/Mechanical	<input type="checkbox"/> Sign Company	<input type="checkbox"/> Irrigation
<input type="checkbox"/> Fire Protection	<input type="checkbox"/> Transport Company	<input type="checkbox"/> Other

Company Name: _____

Applicant Name: _____ Applicant Contact # _____

Owner Name (if different from applicant): _____

Company Contact #: _____ Company Email: _____

Company Address: _____

License Information

Master License Holder: _____ License # _____ Type: _____

Government Issued ID/DL # _____ State _____ Expiration Date: _____

Contractor (if applicable): _____ License # _____ Type: _____

Government Issued ID/DL # _____ State _____ Expiration Date: _____

Registrant State Trade License Number: _____ Company State Trade License Number: _____

**Please note, photocopies of Government issued DL/ID and Masters License are required for registration*

Authorized Signature

Authorized Person: _____ State DL/ID: _____ Cell Phone: _____

Authorized Person: _____ State DL/ID: _____ Cell Phone: _____

Comments:

<u>Office Use Only</u>				
<input type="checkbox"/> COI	<input type="checkbox"/> State ID/DL	<input type="checkbox"/> State Trade License	<input type="checkbox"/> Contractor License	<input type="checkbox"/> TDLR
<input type="checkbox"/> Com. State Trade License	<input type="checkbox"/> Master License	<input type="checkbox"/> Plumbing TSBPE Verification Page		